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BEFORE THE
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 2010-300

OAH No. L-2010040120

GRACE ANNE MCMEEKIN AKA
GRACE ANNE PATTEE MCMEEKIN

ORDER NUNC PRO TUNC

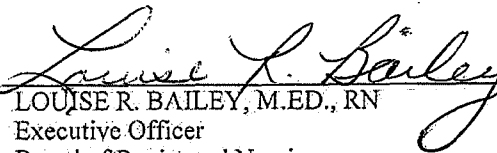
Respondent.

The Adopted Stipulation and Order effective December 29, 2011, is hereby corrected nunc
pro tunc as follows:

Paragraph 8 is amended to read as follows:

8. Respondent understands and agrees that the charges and allegations in Accusation
No. 2010-300, if proven at a hearing, constitute cause for imposing discipline upon her Registered
Nurse License.

DATED: December 23, 2011


LOUISE R. BAILEY, M.ED., RN
Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

LA2009603067
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BEFORE THE
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

GRACE ANNE McMEEKIN AKA
GRACE ANNE PATTEE McMEEKIN
[REDACTED]

Registered Nurse License No. 122088

Respondent.

Case No. 2010-300

OAH No. L-2010040120

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Board of Registered Nursing, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective on December 29, 2011.

It is so ORDERED November 29, 2011.

Jannine Kraus RN
FOR THE BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS

1 KAMALA D. HARRIS
Attorney General of California
2 MARC D. GREENBAUM
Supervising Deputy Attorney General
3 CHRISTINA THOMAS
Deputy Attorney General
4 State Bar No. 171168
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 897-2557
6 Facsimile: (213) 897-2804
Attorneys for Complainant
7

8 **BEFORE THE**
BOARD OF REGISTERED NURSING
9 **DEPARTMENT OF CONSUMER AFFAIRS**
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 2010-300

12 **GRACE ANNE McMEEKIN AKA**
13 **GRACE ANNE PATTEE McMEEKIN**
14 

OAH No. L-2010040120

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

14 Registered Nurse License No. 122088

15 Respondent.
16

17 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled
18 proceedings that the following matters are true:

19 PARTIES

20 1. Louise R. Bailey, M.Ed., RN (Complainant) is the Executive Officer of the Board of
21 Registered Nursing (Board). She brought this action solely in her official capacity and is
22 represented in this matter by Kamala D. Harris, Attorney General of the State of California, by
23 Christina Thomas, Deputy Attorney General.

24 2. Respondent Grace Anne McMeekin aka Grace Anne Pattee McMeekin (Respondent) is
25 represented in this proceeding by attorney Peter R. Osinoff, Esq., and Alexis Amber, Esq. whose
26 address is: Bonne, Bridges, Mueller, O'Keefe & Nichols, 3699 Wilshire Boulevard, 10th Floor,
27 Los Angeles, CA 90010.

28 ///

1 3. On or about November 20, 1959, the Board of Registered Nursing issued Registered Nurse
2 License No. 122088 to Grace Anne McMeekin aka Grace Anne Pattee McMeekin. The
3 Registered Nurse License was in full force and effect at all times relevant to the charges brought
4 in Accusation No. 2010-300 and will expire on August 31, 2013, unless renewed.

5 JURISDICTION

6 4. Accusation No. 2010-300 was filed before the Board of Registered Nursing for the
7 Department of Consumer Affairs, and is currently pending against Respondent. The Accusation
8 and all other statutorily required documents were properly served on Respondent on December
9 16, 2009. Respondent timely filed her Notice of Defense contesting the Accusation. A copy of
10 Accusation No. 2010-300 is attached as exhibit A and incorporated herein by reference.

11 ADVISEMENT AND WAIVERS

12 5. Respondent has carefully read, fully discussed with counsel, and understands the charges
13 and allegations in Accusation No. 2010-300. Respondent has also carefully read, fully discussed
14 with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

15 6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing
16 on the charges and allegations in the Accusation; the right to be represented by counsel at her own
17 expense; the right to confront and cross-examine the witnesses against her; the right to present
18 evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the
19 attendance of witnesses and the production of documents; the right to reconsideration and court
20 review of an adverse decision; and all other rights accorded by the California Administrative
21 Procedure Act and other applicable laws.

22 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every
23 right set forth above.

24 CULPABILITY

25 8. Respondent understands and agrees that the charges and allegations in Accusation No.
26 2010-300, if proven at a hearing, constitute cause for imposing discipline upon her Registered
27 Nurse License.

1 9. Respondent agrees that her Registered Nurse License is subject to discipline and she agrees
2 to be bound by the Board of Registered Nursing's probationary terms as set forth in the
3 Disciplinary Order below.

4 CIRCUMSTANCES IN MITIGATION

5 10. Respondent Grace Anne McMeekin aka Grace Anne Pattee McMeekin is admitting
6 responsibility at an early stage in the proceedings.

7 CONTINGENCY

8 11. This stipulation shall be subject to approval by the Board of Registered Nursing.
9 Respondent understands and agrees that counsel for Complainant and the staff of the Board of
10 Registered Nursing may communicate directly with the Board regarding this stipulation and
11 settlement, without notice to or participation by Respondent or her counsel. By signing the
12 stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek
13 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
14 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
15 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
16 action between the parties, and the Board shall not be disqualified from further action by having
17 considered this matter.

18 12. The parties understand and agree that facsimile copies of this Stipulated Settlement and
19 Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as
20 the originals.

21 13. This Stipulated Settlement and Disciplinary Order is intended by the parties to be an
22 integrated writing representing the complete, final, and exclusive embodiment of their agreement.
23 It supersedes any and all prior or contemporaneous agreements, understandings, discussions,
24 negotiations, and commitments (written or oral). This Stipulated Settlement and Disciplinary
25 Order may not be altered, amended, modified, supplemented, or otherwise changed except by a
26 writing executed by an authorized representative of each of the parties.

1 14. In consideration of the foregoing admissions and stipulations, the parties agree that the
2 Board may, without further notice or formal proceeding, issue and enter the following
3 Disciplinary Order:

4 **DISCIPLINARY ORDER**

5 IT IS HEREBY ORDERED that Registered Nurse License No. 122088 issued to Respondent
6 Grace Anne McMeekin aka Grace Anne Pattee McMeekin is revoked. However, the revocation
7 is stayed and Respondent is placed on probation for five (5) years on the following terms and
8 conditions:

9 **Severability Clause.** Each condition of probation contained herein is a separate and
10 distinct condition. If any condition of this Order, or any application thereof, is declared
11 unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other
12 applications thereof, shall not be affected. Each condition of this Order shall separately be valid
13 and enforceable to the fullest extent permitted by law.

14 1. **Obey All Laws.** Respondent shall obey all federal, state and local laws. A
15 full and detailed account of any and all violations of law shall be reported by Respondent to the
16 Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of
17 compliance with this condition, Respondent shall submit completed fingerprint forms and
18 fingerprint fees within 45 days of the effective date of the decision, unless previously submitted
19 as part of the licensure application process.

20 2. **Comply with the Board's Probation Program.** Respondent shall fully
21 comply with the conditions of the Probation Program established by the Board and cooperate with
22 representatives of the Board in its monitoring and investigation of the Respondent's compliance
23 with the Board's Probation Program. Respondent shall inform the Board in writing within no
24 more than 15 days of any address change and shall at all times maintain an active, current license
25 status with the Board, including during any period of suspension.

26 Upon successful completion of probation, Respondent's license shall be fully restored.

27 3. **Report in Person.** Respondent, during the period of probation, shall
28 appear in person at interviews/meetings as directed by the Board or its designated representatives.

1 4. **Residency, Practice, or Licensure Outside of State.** Periods of residency
2 or practice as a registered nurse outside of California shall not apply toward a reduction of this
3 probation time period. Respondent's probation is tolled, if and when she resides outside of
4 California. Respondent must provide written notice to the Board within 15 days of any change of
5 residency or practice outside the state, and within 30 days prior to re-establishing residency or
6 returning to practice in this state.

7 Respondent shall provide a list of all states and territories where she has ever been licensed
8 as a registered nurse, vocational nurse, or practical nurse. Respondent shall further provide
9 information regarding the status of each license and any changes in such license status during the
10 term of probation. Respondent shall inform the Board if she applies for or obtains a new nursing
11 license during the term of probation.

12 5. **Submit Written Reports.** Respondent, during the period of probation,
13 shall submit or cause to be submitted such written reports/declarations and verification of actions
14 under penalty of perjury, as required by the Board. These reports/declarations shall contain
15 statements relative to Respondent's compliance with all the conditions of the Board's Probation
16 Program. Respondent shall immediately execute all release of information forms as may be
17 required by the Board or its representatives.

18 Respondent shall provide a copy of this Decision to the nursing regulatory agency in every
19 state and territory in which she has a registered nurse license.

20 6. **Function as a Registered Nurse.** Respondent, during the period of
21 probation, shall engage in the practice of registered nursing in California for a minimum of 24
22 hours per week for 6 consecutive months or as determined by the Board.

23 For purposes of compliance with the section, "engage in the practice of registered nursing"
24 may include, when approved by the Board, volunteer work as a registered nurse, or work in any
25 non-direct patient care position that requires licensure as a registered nurse.

26 The Board may require that advanced practice nurses engage in advanced practice nursing
27 for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

28 If Respondent has not complied with this condition during the probationary term, and

Respondent has presented sufficient documentation of her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

7. **Employment Approval and Reporting Requirements.** Respondent shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as a registered nurse. Respondent shall cause to be submitted to the Board all performance evaluations and other employment related reports as a registered nurse upon request of the Board.

Respondent shall provide a copy of this Decision to her employer and immediate supervisors prior to commencement of any nursing or other health care related employment.

In addition to the above, Respondent shall notify the Board in writing within seventy-two (72) hours after she obtains any nursing or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after she is terminated or separated, regardless of cause, from any nursing, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.

8. **Supervision.** Respondent shall obtain prior approval from the Board regarding Respondent's level of supervision and/or collaboration before commencing or continuing any employment as a registered nurse, or education and training that includes patient care.

Respondent shall practice only under the direct supervision of a registered nurse in good standing (no current discipline) with the Board of Registered Nursing, unless alternative methods of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are approved.

Respondent's level of supervision and/or collaboration may include, but is not limited to the following:

- (a) Maximum - The individual providing supervision and/or collaboration is present in

the patient care area or in any other work setting at all times.

(b) Moderate - The individual providing supervision and/or collaboration is in the patient care unit or in any other work setting at least half the hours Respondent works.

(c) Minimum - The individual providing supervision and/or collaboration has person-to-person communication with Respondent at least twice during each shift worked.

(d) Home Health Care - If Respondent is approved to work in the home health care setting, the individual providing supervision and/or collaboration shall have person-to-person communication with Respondent as required by the Board each work day. Respondent shall maintain telephone or other telecommunication contact with the individual providing supervision and/or collaboration as required by the Board during each work day. The individual providing supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to patients' homes visited by Respondent with or without Respondent present.

9. **Employment Limitations.** Respondent shall not work for a nurse's registry, in any private duty position as a registered nurse, a temporary nurse placement agency, a traveling nurse, or for an in-house nursing pool.

Respondent shall not work for a licensed home health agency as a visiting nurse unless the registered nursing supervision and other protections for home visits have been approved by the Board. Respondent shall not work in any other registered nursing occupation where home visits are required.

Respondent shall not work in any health care setting as a supervisor of registered nurses. The Board may additionally restrict Respondent from supervising licensed vocational nurses and/or unlicensed assistive personnel on a case-by-case basis.

Respondent shall not work as a faculty member in an approved school of nursing or as an instructor in a Board approved continuing education program.

Respondent shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity.

If Respondent is working or intends to work in excess of 40 hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.

1 10. **Complete a Nursing Course(s).** Respondent, at her own expense, shall
2 enroll and successfully complete a course(s) relevant to the practice of registered nursing no later
3 than six months prior to the end of her probationary term.

4 Respondent shall obtain prior approval from the Board before enrolling in the course(s).
5 Respondent shall submit to the Board the original transcripts or certificates of completion for the
6 above required course(s). The Board shall return the original documents to Respondent after
7 photocopying them for its records.

8 11. **Cost Recovery.** Respondent shall pay to the Board costs associated with
9 its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the
10 amount of \$8,042.00. Respondent shall be permitted to pay these costs in a payment plan
11 approved by the Board, with payments to be completed no later than three months prior to the end
12 of the probation term.

13 If Respondent has not complied with this condition during the probationary term, and
14 Respondent has presented sufficient documentation of her good faith efforts to comply with this
15 condition, and if no other conditions have been violated, the Board, in its discretion, may grant an
16 extension of Respondent's probation period up to one year without further hearing in order to
17 comply with this condition. During the one year extension, all original conditions of probation
18 will apply.

19 12. **Violation of Probation.** If Respondent violates the conditions of her
20 probation, the Board after giving Respondent notice and an opportunity to be heard, may set aside
21 the stay order and impose the stayed discipline (revocation) of Respondent's license.

22 If during the period of probation, an accusation or petition to revoke probation has been
23 filed against Respondent's license or the Attorney General's Office has been requested to prepare
24 an accusation or petition to revoke probation against Respondent's license, the probationary
25 period shall automatically be extended and shall not expire until the accusation or petition has
26 been acted upon by the Board.

27 13. **License Surrender.** During Respondent's term of probation, if she ceases
28 practicing due to retirement, health reasons or is otherwise unable to satisfy the conditions of

1 probation, Respondent may surrender her license to the Board. The Board reserves the right to
2 evaluate Respondent's request and to exercise its discretion whether to grant the request, or to
3 take any other action deemed appropriate and reasonable under the circumstances, without further
4 hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent will no
5 longer be subject to the conditions of probation.

6 Surrender of Respondent's license shall be considered a disciplinary action and shall
7 become a part of Respondent's license history with the Board. A registered nurse whose license
8 has been surrendered may petition the Board for reinstatement no sooner than the following
9 minimum periods from the effective date of the disciplinary decision:

10 (1) Two years for reinstatement of a license that was surrendered for any reason other
11 than a mental or physical illness; or,

12 (2) One year for a license surrendered for a mental or physical illness.

13 14. **Physical Examination.** Within 45 days of the effective date of this
14 decision, respondent, at his/her expense, shall have a licensed physician, nurse practitioner, or
15 physician assistant, who is approved by the Board before the assessment is performed, submit an
16 assessment of Respondent's physical condition and capability to perform the duties of a
17 registered nurse. Such an assessment shall be submitted in a format acceptable to the Board. If
18 medically determined, a recommended treatment program will be instituted and followed by the
19 respondent with the physician, nurse practitioner, or physician assistant providing written reports
20 to the Board on forms provided by the Board. If Respondent is determined to be unable to
21 practice safely as a registered nurse, the licensed physician, nurse practitioner, or physician
22 assistant making this determination shall immediately notify the Board and Respondent by
23 telephone, and the Board shall request that the Attorney General's office prepare an accusation or
24 petition to revoke probation. Respondent shall immediately cease practice and shall not resume
25 practice until notified by the Board. During this period of suspension, respondent shall not engage
26 in any practice for which a license issued by the Board is required until the Board has notified
27 respondent that a medical determination permits respondent to resume practice. This period of
28 suspension will not apply to the reduction of this probationary time period. If Respondent fails to

1 have the above assessment submitted to the Board within the 45-day requirement, respondent
2 shall immediately cease practice and shall not resume practice until notified by the Board. This
3 period of suspension will not apply to the reduction of this probationary time period. The Board
4 may waive or postpone this suspension only if significant, documented evidence of mitigation is
5 provided. Such evidence must establish good faith efforts by Respondent to obtain the
6 assessment, and a specific date for compliance must be provided. Only one such waiver or
7 extension may be permitted.

8 **15. Mental Health Examination.** Respondent shall, within 45 days of the
9 effective date of this Decision, have a mental health examination including psychological testing
10 as appropriate to determine her capability to perform the duties of a registered nurse. The
11 examination will be performed by a psychiatrist, psychologist or other licensed mental health
12 practitioner approved by the Board. The examining mental health practitioner will submit a
13 written report of that assessment and recommendations to the Board. All costs are the
14 responsibility of Respondent. Recommendations for treatment, therapy or counseling made as a
15 result of the mental health examination will be instituted and followed by Respondent.

16 If Respondent is determined to be unable to practice safely as a registered nurse, the
17 licensed mental health care practitioner making this determination shall immediately notify the
18 Board and Respondent by telephone, and the Board shall request that the Attorney General's
19 office prepare an accusation or petition to revoke probation. Respondent shall immediately cease
20 practice and may not resume practice until notified by the Board. During this period of
21 suspension, Respondent shall not engage in any practice for which a license issued by the Board
22 is required, until the Board has notified Respondent that a mental health determination permits
23 Respondent to resume practice. This period of suspension will not apply to the reduction of this
24 probationary time period. If Respondent fails to have the above assessment submitted to the
25 Board within the 45-day requirement, Respondent shall immediately cease practice and shall not
26 resume practice until notified by the Board. This period of suspension will not apply to the
27 reduction of this probationary time period. The Board may waive or postpone this suspension
28 only if significant, documented evidence of mitigation is provided. Such evidence must establish

1 good faith efforts by Respondent to obtain the assessment, and a specific date for compliance
2 must be provided. Only one such waiver or extension may be permitted.

3 16. **Actual Suspension of License.** Respondent is suspended from the practice of
4 registered nursing for six (6) months beginning the effective date of this Decision.
5 During the suspension period, all probation conditions are in full force and effect except those
6 relating to actual nursing practice. This period of suspension will not apply to the reduction of
7 this probationary time period.

8 ACCEPTANCE

9 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
10 discussed it with my attorneys, Peter R. Osinoff, Esq. and Alexis Amber, Esq. I understand the
11 stipulation and the effect it will have on my Registered Nurse License. I enter into this Stipulated
12 Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be
13 bound by the Decision and Order of the Board of Registered Nursing, Department of Consumer
14 Affairs.

15
16 DATED: 10-24-11

Grace Anne McMeekin
GRACE ANNE McMEEKIN AKA GRACE ANNE
PATTEE McMEEKIN
Respondent

17
18
19 I have read and fully discussed with Respondent Grace Anne McMeekin aka Grace Anne Pattee
20 McMeekin the terms and conditions and other matters contained in the above Stipulated
21 Settlement and Disciplinary Order. I approve its form and content.

22 DATED: 11-9-11

Peter R. Osinoff, Esq.
Attorney for Respondent

23
24 DATED: 11-9-11

Alexis Amber, Esq.
Attorney for Respondent

25
26
27 ///

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Board of Registered Nursing, Department of Consumer Affairs.

Dated: _____

11/14/01

Respectfully Submitted,

KAMALA D. HARRIS
Attorney General of California
MARC D. GREENBAUM
Supervising Deputy Attorney General



CHRISTINA THOMAS
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 2010-300

1 EDMUND G. BROWN JR.
Attorney General of California
2 MARC GREENBAUM
Supervising Deputy Attorney General
3 CHRISTINA THOMAS
Deputy Attorney General
4 State Bar No. 171168
300 So. Spring Street, Suite 1702
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Attorneys for Complainant

7
8 BEFORE THE
BOARD OF REGISTERED NURSING
9 DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA
10

11 In the Matter of the Accusation Against:

Case No. 2010-300.

12 GRACE ANNE MCMEEKIN
aka GRACE ANNE PATTEE MCMEEKIN
13 [REDACTED]

ACCUSATION

14 Registered Nurse License No. 122088

15 Respondent.
16

17
18 Complainant alleges:

19 PARTIES

20 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
21 official capacity as the Interim Executive Officer of the Board of Registered Nursing, Department
22 of Consumer Affairs.

23 2. On or about November 20, 1959, the Board of Registered Nursing (Board) issued
24 Registered Nurse License No. 122088 to Grace Anne McMeekin aka Grace Anne Pattee
25 McMeekin (Respondent). The Registered Nurse License was in full force and effect at all times
26 relevant to the charges brought herein and will expire on August 31, 2011, unless renewed.

27 ///

28 ///

JURISDICTION

3. This Accusation is brought before the Board, Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

STATUTORY PROVISIONS

4. Section 118, subdivision (b), provides that the suspension, expiration, surrender or cancellation of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary action during the period within which the license may be renewed, restored, reissued or reinstated.

5. Section 2750 provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.

6. Section 2761, states, in pertinent part:

"The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

"(a) Unprofessional conduct, which includes, but is not limited to, the following:

"(1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions. . . ."

7. Section 2764 provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license. Under section 2811, subdivision (b), the Board may renew an expired license at any time within eight years after the expiration.

REGULATORY PROVISIONS

8. California Code of Regulations, title 16, section 1442, states:

"As used in Section 2761 of the code, 'gross negligence' includes an extreme departure from the standard of care which, under similar circumstances, would have ordinarily been exercised by a competent registered nurse. Such an extreme departure means the repeated failure to provide nursing care as required or failure to provide care or to exercise ordinary precaution in a single

1 situation which the nurse knew, or should have known, could have jeopardized the client's health
2 or life."

3 9. California Code of Regulations, title 16, section 1443, states:

4 "As used in Section 2761 of the code, 'incompetence' means the lack of possession of or the
5 failure to exercise that degree of learning, skill, care and experience ordinarily possessed and
6 exercised by a competent registered nurse as described in Section 1443.5."

7 10. California Code of Regulations, title 16, section 1443.5 states:

8 "A registered nurse shall be considered to be competent when he/she consistently
9 demonstrates the ability to transfer scientific knowledge from social, biological and physical
10 sciences in applying the nursing process, as follows:

11 "(1) Formulates a nursing diagnosis through observation of the client's physical condition
12 and behavior, and through interpretation of information obtained from the client and others,
13 including the health team.

14 "(2) Formulates a care plan, in collaboration with the client, which ensures that direct and
15 indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and
16 for disease prevention and restorative measures.

17 "(3) Performs skills essential to the kind of nursing action to be taken, explains the health
18 treatment to the client and family and teaches the client and family how to care for the client's
19 health needs.

20 "(4) Delegates tasks to subordinates based on the legal scopes of practice of the
21 subordinates and on the preparation and capability needed in the tasks to be delegated, and
22 effectively supervises nursing care being given by subordinates.

23 "(5) Evaluates the effectiveness of the care plan through observation of the client's
24 physical condition and behavior, signs and symptoms of illness, and reactions to treatment and
25 through communication with the client and health team members, and modifies the plan as
26 needed.

27 "(6) Acts as the client's advocate, as circumstances require, by initiating action to improve
28 health care or to change decisions or activities which are against the interests or wishes of the

1 client, and by giving the client the opportunity to make informed decisions about health care
2 before it is provided."

3 COST RECOVERY

4 11. Section 125.3 provides, in pertinent part, that the Board may request the
5 administrative law judge to direct a licensee found to have committed a violation or violations of
6 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
7 enforcement of the case.

8 PATIENT A.C.

9 12. In 2006, Patient A.C., male, age 22, was involved in an accident from which he
10 became addicted to prescription medications. Patient A.C. was a student, and lived with his
11 parents. On or about April 10, 2008, Respondent obtained medications from his pharmacy: 90 -
12 30mg Oxycodone¹ (2,700mg), 60 - 2mg Alprazolam (Xanax²) (120mg), and 100 - 600mg
13 Ibuprofen (60,000mg). On or about April 13, 2008, Respondent reported to his counselor at
14 Action Family that he had relapsed. Respondent was in an outpatient treatment plan at Action
15 Family for the last three (3) months. Patient A.C. agreed to try inpatient treatment for his
16 addiction. Patient A.C.'s counselor arranged inpatient treatment at Aurora Las Encinas Hospital,
17 2900 E. Del Mar Blvd., Pasadena, California.

18 13. On or about April 13, 2008, at 18:00 (6:00 pm), Patient A.C., a 23 year old male,
19 voluntarily presented himself to Aurora Las Encinas Hospital (ALEH), Pasadena, California, for
20 admission for treatment of addiction to Oxycodone and Xanax. Patient A.C., his family and
21 friends arrived and stayed with Patient A.C., leaving at approximately 21:30 (9:30 pm). Patient
22 A.C. was assigned to the Briar unit at ALEH. Respondent was the RN on duty for the unit having
23 13 patients. Respondent's duty was to assess Patient A.C. physically and mentally, and contact
24 the physician for protocol direction. When Respondent observed and documented Patient A.C.'s

25 ¹ Oxycodone is a synthetic opioid analgesic commonly prescribed for acute and chronic
26 pain. It is a potent opiate that can cause intense euphoria, relaxation, and sedation. Its analgesic
27 properties are similar to those of morphine. The primary adverse (toxic) effect is respiratory
28 depression, but others include apnea, respiratory arrest, circulatory depression, hypotension, and
shock.

² Xanax, a brand name for alprazolam, is an anti-anxiety benzodiazepine.

1 signs and symptoms of withdrawal, she was to begin the directed withdrawal protocol.

2 14. ALEH's six (6) page initial assessment of Patient A.C. recorded that Patient A.C. had
3 no ideations of suicide. Patient A.C. had relapsed from being 47 days sober, at that point in time.
4 Patient A.C. in the past had tried dependency detoxification (detox), and experienced withdrawal
5 symptoms of vomiting, tingling, tremors, and diarrhea, and he used medication to minimize the
6 detox symptoms. Patient A.C. in anticipation of the painful detox symptoms, prior to his
7 admission to ALEH, ingested excessive amounts of his available pharmaceuticals. At the
8 minimum, Patient A.C. had in his system approximately 90-150 mg Oxycodone prior to or at the
9 time he met with his counselor at Action Family, and approximately another 120-180 mg
10 Oxycodone and 8-10 mg Xanax prior to presenting himself to ALEH for the detox admission
11 process. Respondent documented Patient A.C. as: having a respiratory rate of 16, "Pt intoxicated
12 & appears drowsy" and "Pt currently intoxicated." Respondent assessed Patient A.C. as having
13 no withdrawal symptoms. Respondent signed Patient A.C.'s initial assessment as the RN
14 Completing the Assessment.

15 15. At ALEH's Briar unit, Respondent's assistant took Patient A.C.'s vitals and recorded
16 a respiratory rate of 10, just prior to Respondent performing her "mini-assessment" of Patient
17 A.C. and recording the following: "Oxycontin - Xanax, Clean 45 days - relapsed then clean again
18 & relapse. 1-Oxycodone 9 30 mg tabs [270mg Oxycodone currently in Pt's system] & [2-] 8 mg
19 Xanax [8 mg Xanax currently in Pt's system] . . . Pt under the influence with slurred speech &
20 kept nodding off during the interview."

21 16. On or about April 13, 2008, at approximately 20:00 (8:00 pm), prior to completing
22 Patient A.C.'s requisite full assessment documentation, Respondent telephoned Barry Blum,
23 M.D., Patient A.C.'s attending physician for medication orders. At 20:30 (8:30 pm), thirty
24 minutes after telephoning Dr. Blum, Respondent was aware that Patient A.C. was under the
25 influence of 270 mg Oxycodone, 270 mg and 8 mg Xanax. Respondent, a registered nurse for
26 approximately 49 years, was aware and ignored the fact that Patient A.C. was under the influence
27 and that the reason he was not experiencing withdrawal symptoms was that Patient A.C. had self-
28 medicated to avoid withdrawal symptoms and Respondent should have acted accordingly.

1 Instead, between about 20:30 (8:30 pm) and her end of shift 23:30 (11:30 pm), Respondent
2 completed Patient A.C.'s assessment symptoms for the previously received medication orders and
3 continued to complete Patient A.C.'s detox assessment forms recording her assessments that
4 Patient A.C. was suitable for detox.

5 17. On or about April 13, 2008, under Respondent's direction, Patient A.C. was
6 administered detox medications as follows:

7	<u>Time</u>	<u>Medication</u>
8	20:15	Catapres TTS ³ 3 patch to his chest
9	21:00	Motrin ⁴ 600mg
10	21:00	Robaxin ⁵ 750mg
11	21:00	Bentyl ⁶ 20mg
12	21:00	Neurontin ⁷ 200mg
13	23:00	Phenobarbital ⁸ 60mg

14 18. On or about April 14, 2008, at 7:45 am, patient A.C. was pronounced dead.
15 (Pasadena Police Department Injury and Death Report records that Paramedics, Engine 37,
16 Sato/Scott pronounced patient A.C.'s time of death and initiated Coroner Case No. 2008-02879.)

17 19. The Coroner's report shows Patient A.C.'s "death is from polymedications overdose"
18 and "Toxicology: overdose levels of Oxycodone plus other medications at therapeutic levels."

19 FIRST CAUSE FOR DISCIPLINE

20
21 ³ Catapres TTS 3 patch, clonidine – transdermal, is used to treat high blood pressure and
22 may also be used to ease withdrawal symptoms associated with the long-term use of narcotics,
alcohol and nicotine (smoking).

23 ⁴ Motrin, a trade name for Ibuprofen, belongs to a drug class called nonsteroidal anti-
inflammatory drugs (NSAIDs). This drug is used in the management of mild to moderate pain,
24 fever, and inflammation.

25 ⁵ Robaxin, a brand name for methocarbamol, is a medication that relaxes muscles.

26 ⁶ Bentyl, a brand name for dicyclomine, a drug used to treat irritable bowel syndrome
(IBS). It has a direct relaxing effect on muscle to reduce contraction of the muscles in the
intestines

27 ⁷ Neurontin, a brand name for gabapentin, is an anticonvulsant that is used for preventing
seizures and reducing pain-related responses.

28 ⁸ Phenobarbital is a barbiturate used to treat and prevent seizures, to treat sleep disorders,
to treat anxiety and to relieve anxiety.

(Gross Negligence)

20. Respondent is subject to disciplinary action under section 2761, subdivision (a)(1), on the grounds of unprofessional conduct, in conjunction with California Code of Regulations, title 16, section 1442, in that on or about April 13, 2008, Respondent was grossly negligent in the care of Patient A.C. as follows:

a. Respondent failed to complete a full head-to-toe nursing assessment consistent for a new admission who was under the influence of controlled substances prior to telephoning the physician with the patient's status;

b. Respondent failed as an ordinarily reasonable, responsible, and prudent nurse to request, at the minimum, that Patient A.C.'s medications be held until he could be medically screened by a physician; and,

c. Respondent administered central nervous system (CNS) depressant medications to Patient A.C. while he was under the influence of controlled substances, and had a reported respiratory rate of 10.

Complainant refers to and by this reference incorporates the allegations set forth above in paragraphs 12 - 19, inclusive, as though set forth fully.

SECOND CAUSE FOR DISCIPLINE

(Incompetence)

21. Respondent is subject to disciplinary action under section 2761, subdivision (a)(1), on the grounds of unprofessional conduct, in conjunction with California Code of Regulations, title 16, sections 1443 and 1443.5, in that on or about April 13, 2008, Respondent failed to exercise the degree of learning, skill, care and experience ordinarily possessed and exercised by a competent registered nurse with regard to the care of Patient A.C. Complainant refers to and by this reference incorporates the allegations set forth above in paragraphs 12 - 20, inclusive, as though set forth fully.

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PRIOR DISCIPLINARY MATTERS

22. Complainant alleges that Respondent was the subject of prior Board discipline as follows:

a. On or about May 3, 1971, the effective date of Decision before the Board in a disciplinary matter entitled *In the Matter of the Accusation Against: Grace McMeekin, R.N. alias Grace Anne Pattee*, Case No. 71-15, for violating section 2762, subdivisions (a) and (e) [obtained and possessed by means of making false entries in hospital records the controlled substance and dangerous drug Talwin], Respondent's license was revoked, with the revocation immediately stayed, and she was placed on five (5) years probation. The matter is complete and final, and made a part hereof by this reference.

b. On or about February 18, 1973, the effective date of Decision before the Board in a disciplinary matter entitled *In the Matter of the Accusation and Petition to Terminate Probation Against: Grace McMeekin, R.N. alias Grace Anne Pattee*, Case No. 73-16, for violating section 2762, subdivision (a) [obtained and possessed a controlled substance, Talwin], the revocation granted in Decision 71-15 was set aside and Respondent's license was revoked, with the revocation immediately stayed, and she was placed on five (5) years probation. The matter is complete and final, and made a part hereof by this reference.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board issue a decision:

1. Revoking or suspending Registered Nurse License No. 122088, issued to Respondent;
2. Ordering Respondent to pay the Board the reasonable costs of the investigation and enforcement of this case, pursuant to section 125.3; and,

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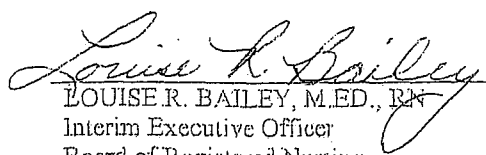
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3. Taking such other and further action as deemed necessary and proper.

DATED: 12/16/09


LOUISE R. BAILEY, M.Ed., RN
Interim Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

LA2009603067